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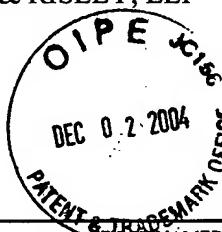
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24504 7590 09/03/2004

THOMAS, KAYDEN, HORSTEMEYER & RISLEY, LLP
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ATLANTA, GA 30339-5948

12/02/2004 ZJUHAR2 00000103 10672395

01 FC:1501 1370.00 OP
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Brooke French	(Depositor's name)
<i>Brooke French</i>	(Signature)
November 30, 2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/672,395	09/26/2003	Chen-Hua Yu	252016-1170	9171

TITLE OF INVENTION: METHOD OF SELECTIVELY MAKING COPPER USING PLATING TECHNOLOGY

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
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nonprovisional	NO	\$1370	\$300	\$1630	12/03/2004
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EXAMINER	ART UNIT	CLASS-SUBCLASS
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NGUYEN, THANH T	2813	438-622000
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1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. **Use of a Customer Number is required.**

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Thomas, Kayden,
2 Horstemeyer, & Risley
3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Taiwan Semiconductor
Manufacturing Company

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Hsin-Chu, Taiwan R.O.C.

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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A check in the amount of the fee(s) is enclosed.
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 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 20-0778 (enclose an extra copy of this form).

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
 b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Date Nov 30, 2004

Typed or printed name Daniel R. McClure

Registration No. 38,962

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